

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>me</i>		10/15/01
O.I.P.E. CLASSIFIER		<i>W</i>	10/29
FORMALITY REVIEW	32	TC3-283	11-13-01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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If more than 150 claims or 10 actions  
staple additional sheet here

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